

| POSITION                  | INITIALS  | ID NO. | DATE     |
|---------------------------|-----------|--------|----------|
| FEE DETERMINATION         | A K / A M |        |          |
| O.I.P.E. CLASSIFIER       | M T W     | 50     | 08-10-91 |
| FORMALITY REVIEW          | F T       | 926    | 09-12-01 |
| RESPONSE FORMALITY REVIEW |           |        |          |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim    | Date    |
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If more than 150 claims or 10 actions  
staple additional sheet here

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09/13/01